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PRE-JOB BRIEFING CHECKLIST

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Job Title: Pr	ocedure or Tracking #:					
Name/Title of Person Conducting Briefing:	Date/Time:	/				
The objective of a good pre-job briefing is to communicate an understanding of scope, hazards, and mitigation to enable the safe completion of work. Follow MCP-3003 for requirements. Additional Radiological Work Permit requirements found in box 11, page 2.						
Initial each box upon completion of the section during the pre-job briefing. Majob.	rk N/A in the comment box if this section is not applicable to this	Initials				
Discuss Scope of Work to be Performed and Limiting Conditions						
Comments:						
2. Review Hazards of the Job and Mitigation of those Hazards (JSA's, F	Permits, LO/TO)					
Comments:						
3. Review Work Procedures and Initial Conditions Involved						
Comments:						
4. Discuss Emergency Escape Routes						
Comments:						
5. Discuss Roles and Responsibilities, Stop Work, Training, and Work	Restrictions. Identify job supervisor in charge.					
Comments:						
6. Discuss Needed Tools and Equipment						
Comments:						
7. Discuss Safety, Radiological (see box 11), Environmental Requirem	ents/Wastes					
Comments:						
8. Discuss Error Likely/Feedback/Lessons Learned						
Comments:						
9. Summarize Scope, Hazards, and Responsibilities						
Comments:						

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Job Title:			Procedure or	Tracking #:				
10. Evaluate INPO Error pred	cursors							
Comments:								
11. Minimum Radiological W	ork Permit (RW	P) Requirements		Additional Notes and Comments and other Building/Equipment/Process specific pre-job checklists covered.				
Scope of work Radiological conditions of the w Procedural and RWP requireme Special radiological control requ Radiologically limiting condition Radiological control hold points Communication & coordination Housekeeping and final cleanu Emergency response provision:	ents uirements s (may void RWP with other groups p provisions							
Print Names of Workers	Training (1)	Badge No.	Craft or Job Title	Company Name (If not INEEL)	Briefing Date	Worker's Initials (2		
				,				
			1	l		1		
 Supervisor initials to verify Worker's initials indicate a 	employee's requ	ired training for p	lanned work is current.	Mark N/A for not applica	able. sed			

By my signature, I indicate that I have conducted the pre-job briefing covering all items indicated above concerning the requirements specified for the work to be performed.

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Person Conducting Briefing:	Date/Time:	/